
COMMUNITY AND PUBLIC HEALTH

To Canterbury General Practitioners and Practice Nurses

12 November 2018

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Canterbury

District Health Board

Te Poari Hauora o Waitaha

Health Alert: Meningococcal Disease Increase due to Serogroup W

There has been an increase in meningococcal disease caused by serogroup W in New Zealand over the past two years. Between 1 January 2017 and 31 December 2017, there were 12 cases of MenW reported, including three deaths. This number has doubled to date for 2018, with 24 cases reported so far, including six deaths.

All health care workers should be aware that:

- This strain presents atypically and primary care and Emergency Department staff are encouraged to maintain a high level of suspicion for the disease.
- MenW can present with the classical signs of meningococcal disease but also atypically with
 - gastro-intestinal symptoms, as well as
 - pneumonia,
 - septic arthritis,
 - endocarditis or epi/supraglottitis
- Because of the fulminant nature of meningococcal sepsis, antibiotics should be administered on suspicion of diagnosis before transferring the patient to hospital.
- Primary care practitioners do not need to be concerned that administering antibiotics will obscure the diagnosis for hospital clinicians. Over-treatment is acceptable in this case, as failure to treat may be fatal.

The antibiotics recommended prior to transfer to hospital are:

	Benzyl Penicillin	Amoxycillin
Adults	1.2 g (2 megaunits) IV (or IM)	1–2 g IV (or IM)
Children	25–50 mg/kg IV (or IM)	50–100 mg/kg IV (or IM)

Antibiotics given prior to transfer should be clearly noted on the clinical information that accompanies the patient to hospital.

Patients with a documented history of anaphylaxis to penicillin and who are suspected of suffering from meningococcal disease should be sent immediately to hospital without pre-admission antibiotics.

A blood sample should be taken as soon as possible for laboratory testing, but should not delay patient treatment or transfer.

While treatment takes priority, please remember that meningococcal disease is notifiable on suspicion and notify Community and Public Health without delay.

Yours sincerely

Dr Ramon Pink
Medical Officer of Health

Community and Public Health

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